

UNITED STATES DISTRICT COURT
EASTERN DISTRICT OF NEW YORK

FILED
IN CLERK'S OFFICE
U.S. DISTRICT COURT E.D.N.Y.

★ JAN 09 2012 ★

LONG ISLAND OFFICE

-----X
Rosalie Soller
Dave Kenneth Soller

(In the space above enter the full name(s) of the plaintiff(s).)

COMPLAINT

Jury Trial: ☒ Yes ☐ No

-against-

① Badge #5972
② John Doe (2nd policeman)

CV 12 0167

**FEUERSTEIN, J
WALL, M.J.**

(In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Part I. Addresses should not be included here.)
-----X

I. Parties in this complaint:

- A. List your name, address and telephone number. If you are presently in custody, include your identification number and the name and address of your current place of confinement. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary.

Plaintiff:

Name Rosalie Soller, + Dave Kenneth
Street Address 120 Terry Road
County, City SMITHTOWN
State & Zip Code N.Y. 11787
Telephone Number 631-724 1543

Soller

- B. List all defendants. You should state the full name of the defendant, even if that defendant is a government agency, an organization, a corporation, or an individual. Include the address where each defendant may be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

① Badge #5972
② John Doe (2nd policeman) { 4th precinct
Sector 412
Car No. 416
Hamlet-SMITHTOWN

Defendant No. 1 Name _____
 Street Address _____
 County, City _____
 State & Zip Code _____
 Telephone Number _____

Defendant No. 2 Name _____
 Street Address _____
 County, City _____
 State & Zip Code _____
 Telephone Number _____

Defendant No. 3 Name _____
 Street Address _____
 County, City _____
 State & Zip Code _____
 Telephone Number _____

Defendant No. 4 Name _____
 Street Address _____
 County, City _____
 State & Zip Code _____
 Telephone Number _____

II. Basis for Jurisdiction:

Federal courts are courts of limited jurisdiction. Only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case involving the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one state sues a citizen of another state and the amount in damages is more than \$75,000 is a diversity of citizenship case.

A. What is the basis for federal court jurisdiction? *(check all that apply)*

☒ Federal Questions ☐ Diversity of Citizenship

B. If the basis for jurisdiction is Federal Question, what federal Constitutional statutory or treaty right is at issue? CIVIL RIGHTS

C. If the basis for jurisdiction is Diversity of Citizenship, what is the state of citizenship of each party?

Plaintiff(s) state(s) of citizenship _____

Defendant(s) state(s) of citizenship _____

III. Statement of Claim:

State as briefly as possible the facts of your case. Describe how each of the defendants named in the caption of this complaint is involved in this action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach additional sheets of paper as necessary.

A. Where did the events giving rise to your claim(s) occur? (my house)

120 Terry Road, Smithtown NY.

B. What date and approximate time did the events giving rise to your claim(s) occur? _____

January 9, 2009 (3:50 - 8:50)

(Sargent Tinon said phone call received 5:42 pm)

C. Facts: _____

What
happened
to you?

2 policemen broke down back door
and questioned David for several hours
about death of 2 parents.

Who did
what?

① Badge #5912
② John Doe (and policeman)

Was anyone
else
involved?

Who else
saw what
happened?

IV. Injuries:

If you sustained injuries related to the events alleged above, describe them and state what medical treatment, if any, you required and received. _____

mental Anguish.

V. Relief:

State what you want the Court to do for you and the amount of monetary compensation, if any, you are seeking, and the basis for such compensation. _____

Monetary compensation
for
1. Unlawful entry
2. invasion of privacy of house
3. Undue aggravation

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 9th day of January, 2012

Signature of Plaintiff

Mailing Address

Rosalie Heller & David Plameth
120 Terry Road
Smithtown NY 11787

Telephone Number

631-724 1545

Fax Number (if you have one)

Note: All plaintiffs named in the caption of the complaint must date and sign the complaint. Prisoners must also provide their inmate numbers, present place of confinement, and address.